

GOALS OF THE TISM PROGRAM

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The overall goal is to provide specialized services to meet the needs of the State of Michigan workforce who may experience a traumatic incident at work.

Pre-Incident Services:

- ◇ Educate employees, managers and union leadership about TISM services
- ◇ Recruit and train traumatic incident response team members

Post-Incident Services:

- ◇ Consult, assess and coordinate appropriate services
- ◇ Help reduce the harmful effects of long term stress
- ◇ Validate and normalize acute stress reactions
- ◇ Accelerate the recovery process
- ◇ Teach appropriate coping strategies
- ◇ Provide referral and follow-up services as appropriate
- ◇ Help return employees and the worksite to normal functioning



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**TISM
SATISFACTION
SURVEY**

THE TRAUMATIC INCIDENT
STRESS MANAGEMENT
PROGRAM PROVIDES
COMPREHENSIVE SUPPORT
SERVICES TO STATE
EMPLOYEES WHO ARE
IMPACTED BY TRAUMATIC
INCIDENTS RELATED TO THE
WORKPLACE.



**800-521-1377
or 517-373-7630**

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO 1312 LANSING, MI

POSTAGE WILL BE PAID BY ADDRESSEE

DEPT. OF TECHNOLOGY, MANAGEMENT & BUDGET
OSE - EMPLOYEE SERVICE PROGRAM
CAPITOL COMMONS CENTER
400 SOUTH PINE, SUITE 103
PO BOX 30669
LANSING MI 48909



NO POSTAGE
NECESSARY IF
MAILED IN THE
UNITED STATES



TISM Service Evaluation

This survey is designed to help us better meet the needs of employees who are exposed to traumatic incidents at work. Using the key below, please take a few minutes to evaluate your experience with Traumatic Incident Stress Management (TISM) Services.

Please do not include your name on this questionnaire.

5 = Strongly Agree 4 = Agree 3 = Neutral 2 = Disagree 1 = Strongly Disagree N/A = Not Applicable

	5	4	3	2	1	N/A
1. TISM services were provided in a timely manner.						
2. The TISM team members were helpful and courteous.						
3. TISM services helped me understand my reactions to the incident.						
4. As a result of the TISM services I feel that I am better able to cope with the effects of this incident.						
5. I would recommend TISM services to others who are impacted by a traumatic event.						
6. If I need additional assistance or information, I know where to call.						

Please check type of service that was provided: ☐ Defusing ☐ Debriefing ☐ Individual ☐ Other ☐ Don't Know

Department/Location where services were provided.

(OPTIONAL)

What was most helpful?

What was least helpful?

Additional Comments:

Thank you for taking the time to complete this survey.

Please return to Melinda Mackey, Coordinator TISM Program, by fax: 517-335-5678, or by mail. To mail please tape closed with the Business Reply Mail address showing on the outside. No postage necessary.

**For further information or assistance please contact the
Employee Service Program at: 800-521-1377 or 517-373-7630.**